

STATE OF INDIANA
APPLICATION FOR MARRIAGE LICENSE

No. 87-557 557
File 8-22-86
Date of Application

FLOYD County

MALE
Medical Examination Report Dated 8-18-86
Name of Physician H. Pierce

FEMALE
Medical Examination Report Dated 8-18-86
Name of Physician H. Pierce

ALL QUESTIONS MUST BE ANSWERED. I.C. 31-1-3-6 prescribed "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".

MALE APPLICANT
Name Danny G. Young
Date of Birth 1953
Place of Birth (State or foreign country) Scottsburg Ind
Residence Address 208 State Rm Rd New Albany Ind
Previous Marital Status: Never Married ☒ OR ☐
Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐
Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree
☐ Other (Specify) Driver license
1. Are you now or have you ever been adjudged to be of unsound mind? No ☒ Yes ☐
If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease? No ☒ Yes ☐
3. Are you related to the female applicant closer than second cousin? No ☒ Yes ☐
4. Are you now under the influence of intoxicating liquor? No ☒ Yes ☐
5. Are you now under the influence of a narcotic drug? No ☒ Yes ☐
6. List the full names of any dependent children.
Joseph Ryan 16
Anthony Allen 10
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☒
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Paul Thomas Young
Residence of father (if deceased so state) deceased
Birthplace of father (State or foreign country) Greensburg Ky
9. Full maiden name of mother Cara May Brock
Residence of mother (if deceased so state) deceased
Birthplace of mother (State or foreign country) Kentucky
State of Indiana } as: I depose and state the information given in this application is true and correct.
County of Floyd
Signed Danny G. Young
New Address _____
Subscribed and sworn to before me this 22 day of August, 1986
William B. Jenks Clerk FLOYD Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.

State of Indiana, } as:
County of _____
Signed _____ Father
Signed _____ Mother
Subscribed and sworn to before me this _____ day of _____, 19____

Clerk

FEMALE APPLICANT
Name Deborah Sue Elrod
Date of Birth 1955
Place of Birth (State or foreign country) New Albany Ind
Residence Address 2109 Culbertson Ave New Albany Ind
Previous Marital Status: Never Married ☒ OR ☐
Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐
Date of birth verified by: ☐ Birth Certificate ☐ Judicial Decree
☐ Other (Specify) Driver license
1. Are you now or have you ever been adjudged to be of unsound mind? No ☒ Yes ☐
If answer is "yes", has the adjudication been removed? No ☐ Yes ☐
2. Are you afflicted with a transmissible disease? No ☒ Yes ☐
3. Are you related to the male applicant closer than second cousin? No ☒ Yes ☐
4. Are you now under the influence of intoxicating liquor? No ☒ Yes ☐
5. Are you now under the influence of a narcotic drug? No ☒ Yes ☐
6. List the full names of any dependent children.
Cheryl Ann Elrod 14
Father has custody
7. Are you required by any court order or orders to support the above dependent children? No ☐ Yes ☐
If answer is "yes", it is required that this Application be accompanied by satisfactory proof that you are in compliance with any court order or orders issued for their support.
8. Full name of father Charles Lee Reynolds
Residence of father (if deceased so state) 2413 Sparta N.Y.
Birthplace of father (State or foreign country) Harrison Co Ind
9. Full maiden name of mother Joye Ruth Faith
Residence of mother (if deceased so state) same as father
Birthplace of mother (State or foreign country) Harrison Co Ind
State of Indiana } as: I depose and state the information given in this application is true and correct.
County of Floyd
Signed Deborah Sue Elrod
New Address _____
Subscribed and sworn to before me this 22 day of August, 1986
William B. Jenks Clerk FLOYD Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.

State of Indiana, } as:
County of _____
Signed _____ Father
Signed _____ Mother
Subscribed and sworn to before me this _____ day of _____, 19____

Clerk

COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the _____ County _____ Court by written order issued _____ and filed in _____ authorizes and directs the issuance of a marriage license to the above named parties.

RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage license issued by the clerk of the _____ FLOYD _____ Circuit Court of Indiana dated the 25 day of AUGUST, 1986, authorizing the joining together as husband and wife DANNY G. YOUNG and DEBORAH SUE ELROD.
Be it further remembered, the following marriage certificate was filed in my office, to-wit:
I, JULIE A. FERGUSON hereby certify that on the 6 day of SEPTEMBER, one thousand nine hundred and EIGHTY SIX at NEW ALBANY, County of FLOYD, State of Indiana, Groom DANNY G. YOUNG of FLOYD County, State of INDIANA and, Bride DEBORAH SUE ELROD of FLOYD County, State of INDIANA were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of FLOYD County.
Dated this 6 day of SEPTEMBER, 1986.
Signed JULIE A. FERGUSON
Official Designation MINISTER
Filed and recorded in accordance with the laws of the State of Indiana this 9 day of SEPTEMBER, 1986.
Signed WILLIAM B. JENKS Clerk
FLOYD Circuit Court